

NOTICE OF FEE DUE

DATE 01-04-05

TO IFN

FROM Office of Initial Patent Examination

SUBJECT Fee Due

APPLICATION NUMBER 10 667 609

A fee is due for the attached document submitted to the U.S. Patent and Trademark Office for the following reason. Please check the application for the appropriate authorization to charge a deposit account. If an authorization is present, please charge the Appropriate fee. If an authorization is not present, notify the applicant of the fee deficiency.

☐ Insufficient fee by check

☒ Insufficient funds in deposit amount

☐ Declined credit card

☐ Non-authorization for charge to deposit account

☐ No fee submitted per requirement

The correct fee code: _____ amount \$ _____

The suspended fee code: 1999 amount \$ _____

Fee Due amount =\$ _____

If you have any questions, please contact Cynthia Streater at 703-306-5430 or Eleanor Kurtz 703-308-3642

Terminal Operator _____

Deposit Account Maintenance

Deposit Account Window Help



Deposit Account

Number: 012525

Balance Amount: 1.00

Holder

Name: MEDTRONIC VASCULAR, INC.



Address

Attention: IP LEGAL DEPT.

Street: 3576 UNOCAL PLACE

Province:

City: SANTA ROSA

State:

CA

Postal Code: 95403

Country:

US

Telephone: 707-525-0111

Fax: 707-543-5420

Details

Category Code: NONGOVNMNT

Type: REGULAR

Notification Amt: 0.00

Status

Access Code: 4773

☒ Active

☐ Closed

CCHAU1

01/04/2005